

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM

Attachment 3.1-C

State of New York

OFFICIAL

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STANDARDS AND METHODS OF ASSURING HIGH QUALITY CARE

The following is a description of the methods that will be used to assure that the medical care and services are of high quality, and a description of the standards established by the State to assure high quality care:

- a. Medical assistance will be provided in accordance with the individual's medical needs based on the prescription or recommendation of the attending physician, dentist or other licensed practitioner eligible to participate in the program.
- b. All professional persons providing service must be properly licensed under State Law. For certain paramedical services such as occupational therapy, speech therapy, etc., where there are no State licensing requirements, the persons providing such services must be qualified or certified by the appropriate national professional association.
- c. Medical institutions such as hospitals, nursing homes, etc: health related facilities such as intermediate care facilities, medical facilities such as clinics, private laboratories, etc.; and health agencies (such as community visiting nurse associations) which provide care to recipients in the medical assistance program must be licensed or approved by the appropriate State authority.
- d. Services ordinarily interpreted to be specialist's procedures or care must be provided by practitioners who are qualified specialists.
- e. Home nursing services provided must conform to standards approved by the State Department of Health.
- f. For certain care or services the recommendation of an appropriate specialist is required. (i.e., the more unusual prosthetic devices, rehabilitation therapies, orthodontic care, etc.).
- g. Requirement that each local welfare district establish and maintain an adequate system of individual patient medical records showing diagnoses and services provided.
- h. Collection of other medical information such as, at the State level, expenditures for various items of medical care and gross utilization data by categories. At the local level similar expenditure data related to individual medical attendants and vendors, and utilization data, particularly for physicians and hospital care. Drug records for individual patients are also maintained in a number of local welfare districts.

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